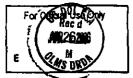
U.S. Department of Labor Office of Labor-Management Standards Washington DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No 1215-0188 Expires 11 30-2006

This report is mandatory under P L 88-257 as amended Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U S C 439 or 440



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U 70785	2. Fiscal Year Covered From.			
	1 / 1 / 2005 Through 12/31/2005			
3 Name and address of person filing	4 Name file number and address of labor organization			
Name Louis L Kaminsky	Name Knoters (Naterproofers Loan) 12			
	Labor Organization File Number 63/154			
PO Box, Bidg Room No If any	P O Box, Building and Room Number If any			
Street Z5 Glen Road	Street 15 Bernhard Road			
chy West Haven	cay North Haven			
State Connecticut ZP Code +4 06516	State Connecticut ZIP Code + 4 06473			
5 Position in labor organization. Apprentice Caardinator				
Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the excitations set forth in the instructions) A. Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of				
I M. PHEN AND MILENTEN DI CHEMINACIEN III MANIMALAMANIN MILANDONINI MANIMALIWANINI VI	r derived income or other economic benefit of			
monetary value from an employer whose employees your organization	tion represents or is actively seeking to represent.			
monetary value from an employer whose employees your organization and address of Employer (including trade name if any)	tion represents or is actively seeking to represent. 7.s. Nature of interest, Transaction or Income			
monetary value from an employer whose employees your organization	tion represents or is actively seeking to represent.			
6 Name and address of Employer (including trade name if any)	tion represents or is actively seeking to represent.			
monetary value from an employer whose employees your organization. 8 Name and address of Employer (including trade name if any) Name Trade Name if any	tion represents or is actively seeking to represent. 7.a. Nature of interest, Transaction or Income			
monetary value from an employer whose employees your organizates. 6 Name and address of Employer (including trade name if any) Name Trade Name if any: P O Box Bidg Room No if any	7.a. Nature of interest, Transaction or Income			
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Mame and address of Employer (including trade name if any) Name Trade Name if any P O Box Bidg Room No if any State ZIP Code + 4 Signature and verification. The undersigned declares under penalty or	T.a. Nature of interest, Transaction or Income 7 b Amount. 7 b Amount. 7 b Perjury and other applicable penalties of the law that all of the information rying documents) has been examined by the signatory and is, to the best of the			
Mame and address of Employer (including trade name if any) Name Trade Name if any P O Box Bidg Room No if any State ZIP Code + 4 Signsture and verification. The undersigned declares under penalty of submitted in this report (including the information contained in any accompany)	T.a. Nature of interest, Transaction or Income 7 b Amount. 7 b Amount. 7 b Perjury and other applicable penalties of the law that all of the information rying documents) has been examined by the signatory and is, to the best of the			

Name of Person Filing	ور (۱۰۰ فر ف	J. 12	File Number U-		
B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested					
8 Name and address of Business (including trade name if any)	****	9 Business deals with			
Name United Union of Rooters, Trade Name Harry Prooters + Alled Worke		e. Labor Organiz	ation		
PO Box, Bidg. Room No., If any	2436	V b Trust			
Street 15 Bernhard Road		c. Employer			
an North-Hoven -		~			
State Connecticut ZIP Code +4 0	473		_		
10 if 9.b or 9 c. is checked give trust or employer's name	1	11 a Nature of such dea			
Name United Union of Rooters	10/2	Managem	ent of Houth quelline		
Trade Name if any Wealth + Welfare	11	FUND			
PO Box, Bidg Room No if any F.O. Box 5	()	Bi-Month	y Truster Meetings		
Street 60 North Main Street		1.b Approximate dollar va	tue of such dealing \$29/00		
City Walling Ford	'	2.a Nature of interest he	eld or Income received		
State Counecticut ZIP Code +4 60	6492		6 54		
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i.	-	t	The parameter that the first state of the st		
	[1	2 b Amount.			
C Received from any employer (other than an employer covered under parts A and B above)					
or from any labor relations consultant to an employer any payment of money or other thing of value					
13 a. Name and address of Employer or Labor Relations Consults (including trade name, if any).	ınt	14 a, Nature of payment.	and antipoliticism. And anipolitic side		
Name	į		• •		
Trade Name if any	-	الاستان ال	of Business Dinuer		
PO Box Bidg. Room No if any	-	Fair vaive	1		
Street					
City	~ ,	, 1			
State ZIP Code + 4	•				
13 b is the Business an Employer or Consultant	7	14.b. Amount of payment.	\$70.00		